

PUBLIC VOUCHER FOR PURCHASES, D
SERVICES OTHER THAN PERSONAL

D. O. Vou. No. _____
Bu. Vou. No. 2407

U. S. COST REIMBURSABLE
(Department, bureau, or establishment)

Voucher prepared at _____
(Give place and date)

THE UNITED STATES, Dr., Payee's Account No. _____

To _____
(Payee)

PAID BY
Encl A3
DPD-2028-55
COPY 1 OF 2

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary) Discount Terms	QUANTITY	UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts.
		Costs				\$5,177.	49
Use continuation sheet(s) if necessary				Total		\$5,177.	49

PAYMENT:

Complete ☐
Partial ☐
Final ☐

Shipped from _____ to _____ Weight _____ Government B/L No. _____
Total \$5,177.49

I certify that the above bill is correct and just and that payment has not been received.

(Sign original only)

(Payee must NOT use this space)

Differences _____

Amount verified; correct for
(Signature or initials) *EE*

Date 3-16-59 *Payee _____
(Certificate is made by payee on attached bill or bills)

Per _____

Contract No. _____ Date _____ Req. No. _____ Date _____ Invoice Rec'd. _____

Pursuant to authority vested in me, I certify that this account is correct and proper for payment.

† Approved for \$ _____

† _____
(Authorized Certifying Officer)

By _____
SIGN ORIGINAL ONLY

Title _____

Title _____ Date _____

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

Paid by { Check No. _____ dated _____, 19____, for \$ _____ (on Treasurer of the United States in favor of payee named above.)
Cash, \$ _____, on _____, 19____, Payee _____
(Sign original only)

* When a voucher is signed or recollated in the name of a company or corporation, the name of the person writing the company or corporation must be given, as in the following examples:
"John Doe Company, per John Smith, Secretary" or "Treasurer", as the case may be.
† If the ability to certify and authority to approve are combined in one person, one signature only is necessary, otherwise the approving officer will sign on the line below "Approved for \$ _____", and over his official title.

Title _____
10-22000-0

Approved For Release 2001/08/15 : CIA-RDP64-00360R000600040153-3

STATOTHR

Approved For Release 2001/08/15 : CIA-RDP64-00360R000600040153-3

THE RAMO, WOOLDRIDGE CORPORATION
FORM STL - 660

ACCOUNTS PAYABLE WEEKLY DIST

DATE 3 / 1 / 59

Approved For Release 2001/08/15 : CIA-RDP64-00360R000600040153-3																					
No.	BATCH			INVOICE NUMBER	PURCHASE ORDER	CHECK NUMBER	PAYMENT DATE		Vendor Number	GROSS AMOUNT	DISCOUNT	Tax Class	Cost Element	TR. CODE	COST CENTER			CHARGE DISTRIBUTION			NET AMOUNT
	Mo.	Day	Yr.				Mo.	Day							Maj.	Int.	Sub.	Account	M.I.O.	S.O.	
99	2	27	9	36		16161			3744				1	58	25	00	00	12501	3032	58	746 746 746

[illegible]

ACCOUNTS PAYABLE WEEKLY DIST

DATE 3 / 1 / 59

[illegible]

THE RAMO-WOOLDRIDGE CORPORATION
FORM STL - 680

ACCOUNTS PAYABLE WEEKLY DIST

DATE 3 / 1 / 59

Approved For Release 2001/08/15 : CIA-RDP64-00360R000600040153-3																					
No.	BATCH			INVOICE NUMBER	PURCHASE ORDER	CHECK NUMBER	PAYMENT DATE		Vendor Number	GROSS AMOUNT	DISCOUNT	Tax Class	Cost Element	TR. CODE	COST CENTER			CHARGE DISTRIBUTION			NET AMOUNT
	Mo.	Day	Yr.				Mo.	Day							Mej.	Int.	Sub.	Account	M.I.O.	S.O.	
3	2	24	9	29015	42642		3	3	290				1	50	25	00	00	12501	3093	20	228
7	2	25	9	1701903	43382				539				1	50	25	00	00	12501	3093	20	59500
																					59728
																					59728 *
																					59728 *
																					59728 *
																					59728 *
																					59728 *
																					59728 *
																					59728 *
																					59728 *
																					59728 *
																					59728 *
																					59728 *
																					59728 *
																					59728 *
																					59728 *
																					59728 *
																					59728 *
																					59728 *
																					59728 *
																					59728 *
																					59728 *
																					59728 *
																					59728 *
																					59728 *
																					59728 *
																					59728 *
																					59728 *
																					59728 *
																					59728 *
																					59728 *
																					59728 *
																					59728 *
																					59728 *
																					59728 *
																					59728 *
																					59728 *
																					59728 *
																					59728 *
																					59728 *
																					59728 *
																					59728 *
																					59728 *
																					59728 *
																					59728 *
																					59728 *
																					59728 *
																					59728 *
																					59728 *
																					59728 *
																					59728 *
																					59728 *
																					59728 *
																					59728 *
																					59728 *
																					59728 *
																					59728 *

FORM STL - 660

FORM STL - 660																					
Approved For Release 2001/08/15 : CIA-RDP64-00360R000600040153-3																					
No.	BATCH			INVOICE NUMBER	PURCHASE ORDER	CHECK NUMBER	PAYMENT DATE		Vendor Number	GROSS AMOUNT	DISCOUNT	Tax Class	Cost Element	TR. CODE	COST CENTER			CHARGE DISTRIBUTION			NET AMOUNT
	Mo.	Day	Yr.				Mo.	Day							Maj.	Int.	Sub.	Account	M.I.O.	S.O.	
8	2	25	9	96413	43798		3	3	264				1	50	25	00	00	12501	3093	25	13200 13200 * 13200 *

THE RAMO,WOOLDRIDGE CORPORATION
FORM STL - 660

ACCOUNTS PAYABLE WEEKLY DIST

DATE 3 / 1/59

Approved For Release 2001/08/15 : CIA-RDP64-00360R0006000040153-3																					
BATCH				INVOICE NUMBER	PURCHASE ORDER	CHECK - NUMBER	PAYMENT DATE		Vendor Number	GROSS AMOUNT	DISCOUNT	Tax Class	Cost Element	TR. CODE	COST CENTER			CHARGE DISTRIBUTION			NET AMOUNT
No.	Mo.	Day	Yr.				Mo.	Day							Med.	Int.	Sub.	Account	M.I.O.	S.O.	
7	2	25	9	DM00870	5204		3	3	539				1	50	25	00	00	12501	3093	75	10240-
9	2	25	9	252250	4683		3	6	539				1	50	25	00	00	12501	3093	75	57500
																					47260 *
																					47260 **
																					148346 ***

THE RAMO, WOULD BRIDGE CORPORATION
FORM STL - 660

ACCOUNTS PAYABLE WEEKLY DIST

DATE 3 / 1 / 59

Approved For Release 2001/08/15 : CIA-RDP64-00360R000600040153-3																						
No.	BATCH			INVOICE NUMBER	PURCHASE ORDER	CHECK * NUMBER	PAYMENT DATE		Vendor Number	GROSS AMOUNT	DISCOUNT	Tax Class	Cost Element	TR. CODE	COST CENTER			CHARGE DISTRIBUTION			NET AMOUNT	
	Mo.	Day	Yr.				Mo.	Day							Met.	Int.	Sub.	Account	M.I.O.	S.O.		Work Order
7	2	25	9	17586	2877		3	3	2120				1	50	25	00	00	12501	5047	17	3014 3014 * 3014 ** 3014 ***	